

IN THE CLAIMS

Please amend and/or cancel the claim(s) of the captioned application, and/or add claim(s) to the captioned application, in accordance with the following annotations and/or mark-ups showing all change(s) relative to the previous version(s) of the claim(s) as required by 37 C.F.R. 1.121:

1. (Withdrawn) A stabilizer for implanting in the disk space between adjacent vertebrae of a patient to stabilize the vertebrae comprising:

an elongate implant having a substantially rectangular cross-sectional shape;

a lock having a bearing surface formed thereon for mounting to one end of said implant with the bearing surface of said lock contacting an adjacent vertebrae to resist rotation of said implant in the disk space; and

an insert mounted to and biased away from said implant and into engagement with an adjacent vertebra.

2. (Currently amended) A method of providing cushioning between an implant having a substantially rectangular cross-sectional shape, the width of the implant being greater than the height of the implant, positioned in the space from which a portion of the intervertebral disk space has been removed and a vertebra adjacent the disk space comprising the steps of:

inserting an the elongate implant into the intervertebral disk space and into with the width of the implant in contact with the adjacent vertebra, the implant being provided with an insert comprising a portion of the implant that is movable relative to the implant;

rotating the implant along the longitudinal axis thereof so that the height of the implant contacts the adjacent vertebra; and

biasing a portion of the implant the insert away from the implant against the adjacent vertebra; and

restraining the implant against rotation along the longitudinal axis thereof and relative to the adjacent vertebra.

3. (Withdrawn) A stabilizer for insertion into a space between two adjacent vertebrae comprising:

an implant;

an insert mounted to and movable with respect to said implant;

means between said insert and said implant for biasing said insert away from said implant and into contact with an adjacent vertebrae when said implant is inserted into a space between two adjacent vertebrae; and

a lock for mounting to said implant and having a surface formed thereon for bearing against one or both of the adjacent vertebrae to resist rotation of said implant relative to the adjacent vertebrae.

4. (Withdrawn) The stabilizer of claim 3 additionally comprising means formed on either of said implant or said insert, or on both said implant and said insert, for maintaining alignment of said implant and said insert as said insert moves relative to said implant.

5. (Withdrawn) The stabilizer of claim 3 additionally comprising means for resisting movement of said insert relative to said implant until said implant is inserted into the space between two adjacent vertebrae.

6. (Withdrawn) The stabilizer of claim 3 additionally comprising means for limiting the distance said insert moves relative to said implant.

7. (Withdrawn) The stabilizer of claim 3 additionally comprising means for resisting rotation of said implant relative to said lock.

8. (Withdrawn) The stabilizer of claim 7 wherein said rotation resisting means comprises a surface formed on said lock for engaging at least two surfaces of said implant.

9. (Withdrawn) The stabilizer of claim 8 additionally comprising a key formed on at least one of the surfaces of said implant that engage the surface of said lock and a keyway formed on the surface of said lock for receiving said key.

10. (Withdrawn) The stabilizer of claim 8 additionally comprising a key formed on the surface of said lock and a keyway formed on at least one of the surfaces of said implant that engage the surface of said lock for receiving said key.

11. (Withdrawn) A stabilizer for insertion into a space between two adjacent vertebrae comprising:

an implant;

an insert mounted to said implant, said insert being comprised of a springy material that is initially compressed for insertion into a space between two adjacent vertebrae and then released from the initial compressed state into engagement with an adjacent vertebra; and

a lock for mounting to said implant and having a surface formed thereon for bearing against one or both of the adjacent vertebrae to resist rotation of said implant relative to the adjacent vertebrae.

12. (Withdrawn) The stabilizer of claim 11 additionally comprising means formed on either of said implant or said insert, or on both said implant and said insert, for maintaining alignment of said implant and said insert as said insert moves relative to said implant.

13. (Withdrawn) The stabilizer of claim 11 additionally comprising means for compressing said insert relative to said implant until said implant is inserted into the space between two adjacent vertebrae.

14. (Withdrawn) The stabilizer of claim 11 additionally comprising means for limiting movement of said insert relative to said implant.

15. (Withdrawn) The stabilizer of claim 11 additionally comprising means for resisting rotation of said implant relative to said lock.

16. (Withdrawn) The stabilizer of claim 15 wherein said rotation resisting means comprises a surface formed on said lock for engaging at least two surfaces of said implant.

17. (Withdrawn) The stabilizer of claim 16 additionally comprising a key formed on at least one of the surfaces of said implant that engage the surface of said lock and a keyway formed on the surface of said lock for receiving said key.

18. (Withdrawn) The stabilizer of claim 16 additionally comprising a key formed on the surface of said lock and a keyway formed on at least one of the surfaces of said implant that engage the surface of said lock for receiving said key.

19. (Currently amended) A method of stabilizing two vertebrae comprising the steps of:

removing a portion of the intervertebral disk of a patient;

inserting an implant having an insert mounted thereto into the ~~intervertebral disk~~ space from which a portion of the intervertebral disk has been removed;

biasing ~~an the insert comprising a portion of the implant~~ into engagement with a vertebra adjacent the intervertebral disk space; and

resisting rotation of the implant relative to the adjacent vertebra.

20. (Currently amended) The method of claim 19 additionally comprising filling the any space between the implant and the ~~portion of the intervertebral disk that has been removed~~ two vertebrae with a hydrogel.

21. (Previously presented) The method of claim 20 wherein said hydrogel is selected from the group consisting of protein polymers, polyvinylpyrrolidone polymers, and modified collagen matrix.

22. (Previously presented) The method of claim 20 additionally comprising contacting the remaining portion of the intervertebral disk, or the hydrogel, or both the remaining portion of the intervertebral disk and the hydrogel with a medical grade adhesive.

23. (Currently amended) The method of claim 19 additionally comprising sealing ~~the opening into the intervertebral disk space~~ with a medical grade polymer.

24. (Previously presented) The method of claim 19 wherein the insert comprises a metal or other relatively incompressible material and is biased away from the implant into engagement with the adjacent vertebra by a spring.

25. (Previously presented) The method of claim 24 additionally comprising restraining the insert against movement relative to the implant until after the implant is inserted into the the intervertebral disk space from which a portion of the intervertebral disk has been removed.

26. (Previously presented) The method of claim 19 wherein the implant comprises a metal or other relatively incompressible material and the insert comprises a springy, compressible material that provides a cushioning effect when engaged by the adjacent vertebrae.

27. (Previously presented) The method of claim 26 additionally comprising compressing the insert before inserting the implant and insert into the intervertebral disk space from which a portion of the intervertebral disk has been removed and then releasing the insert from the initial, compressed state to engage the adjacent vertebra.